

09/14/705  
1 of 2

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	10	minus 20 =
INDEPENDENT CLAIMS		minus 3 =
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than the entry in column 2, write "0" in column 2.

SMALL ENTITY TYPE		OTHER THAN SMALL ENTITY	
RATE	FEES	RATE	FEES
	395.00		790.00
X\$11=		X\$22=	
X41=		X82=	
+135=		+270=	
TOTAL		TOTAL	860
OR		OR	

## 3/17/05 CLAIMS AS AMENDED - PART B

(Column 1)

(Column 2)

(Column 3)

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	11	minus	20	=
Independent	1	minus	3	=

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$11=		X\$22=	
X41=		X82=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	
OR		OR	

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	11	minus	20	=
Independent	1	minus	3	=

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE		ADDITIONAL FEE	
X\$11=		X\$22=	
X41=		X82=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	
OR		OR	

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	14	minus	20	=
Independent	1	minus	3	=

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE		ADDITIONAL FEE	
X\$11=		X\$22=	
X41=		X82=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	
OR		OR	

BEST AVAILABLE COPY

AMENDMENT A

AMENDMENT B

AMENDMENT C

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**PATENT APPLICATION FEE DETERMINATION RECORD**  
 Substitute for Form PTO-875

Application or Docket Number

09/914705

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	10	minus 20 =
INDEPENDENT CLAIMS (37 CFR 1.16(b))	1	minus 3 =
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.16(d))

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**CLAIMS AS AMENDED - PART II: RCE Filed**

8/15/06

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	17	20	0
	Independent (37 CFR 1.16(b))	4	3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

1/29/07

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	16	20	0
	Independent (37 CFR 1.16(b))	3	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))		20	0
	Independent (37 CFR 1.16(b))		3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.